

FEC
FORM 1

STATEMENT OF
ORGANIZATION

RECEIVED

2014 JUN 12 AM 11:26

Office Use Only
FEC MAIN CENTER

1. NAME OF
COMMITTEE (in full)

☐

(Check if name
is changed)

Example: If typing, type
over the lines.

12FE4M5

BOL PAC - Blessings of Liberty PAC

ADDRESS (number and street)

38 Executive Park, Suite 390

☐

(Check if address
is changed)

Irvine

CA

92614

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)

info@campaign-compliance.com

☐

(Check if address
is changed)

COMMITTEE'S WEB PAGE ADDRESS (URL)

☐

(Check if address
is changed)

2. DATE

MM / DD / YYYY
06 / 04 / 2014

06

04

2014

3. FEC IDENTIFICATION NUMBER

C

4. IS THIS STATEMENT

☒

NEW (N)

OR

☐

AMENDED (A)

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Jen Slater

Signature of Treasurer

Jen Slater

Date

MM / DD / YYYY
06 / 04 / 2014

06

04

2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Office
Use
Only

For further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100

FEC FORM 1
(Revised 02/2009)